



17236 U.S. 110

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 4003-09101

First Inventor D. Patrick Steagall

Title | Cushion Having Plural Zones with Discrete Compressibility Characteristics

Express Mail Label No. | EV 994263630 US

117548 U.S.PTO
10/773882

020504

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Mail Stop Patent Application
Commissioner for Patents
P. O. Box 1450
Arlington VA 22313-1450

- | | |
|--|---|
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)
<i>(Submit an original and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status.
See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages: 25]
<i>(preferred arrangement set forth below)</i></p> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 3]</p> <p>5. Oath and Declaration [Total Pages]</p> <p>a. <input type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))
<i>(for continuation/divisional with Box 18 completed)</i></p> <p>i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u>
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> | <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission
<i>(if applicable, all necessary)</i></p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. Specification Sequence Listing on:</p> <p style="margin-left: 20px;">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p> <p style="margin-left: 20px;">ii. <input type="checkbox"/> paper</p> <p>c. <input type="checkbox"/> Statements verifying identity of above copie</p> |
| ACCOMPANYING APPLICATION PARTS | |
| <p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney
<i>(when there is an assignee)</i></p> <p>11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of ID Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
<i>(Should be specifically itemized)</i></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s)
<i>(if foreign priority is claimed)</i></p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> | |

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))
 10. 37 CFR 3.73(b) Statement Power of
(when there is an assignee) Attorney
 11. English Translation Document (*if applicable*)
 12. Information Disclosure Copies of IDS
Statement (IDS)/PTO-1449 Citations
 13. Preliminary Amendment
 14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
 15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
 16. Nonpublication Request under 35 U.S.C.
122(b)(2)(B)(i). Applicant must attach form
PTO/SB/35 or its equivalent.
 17. Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-Part (CIP)
or application information: _____
Examiner _____

of prior application No.:
Group/Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number of Bar Code Label	30652	or	<input type="checkbox"/>	Correspondence address below
Name				
Address				
City		State		Zip Code
Country		Telephone		Fax
Name (Print/Type)	Michael S. Bush	Registration No. (Attorney/Agent)		31,745
Signature			Date: February 5, 2004	

17236 U.S. PTO

FEE TRANSMITTAL For FY 2003

Patent fees are subject to annual revision. Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** \$ 770.00

Complete if Known	
Application Number	New Application
Filing Date	Herewith
First Named Inventor	D. Patrick Steagall
Examiner Name	Not Yet Assigned
Group Art Unit	Not Yet Assigned
Attorney Docket No.	4003-09101

METHOD OF PAYMENT (Check all that apply)

Check Credit Card Money Order Other None

Deposit Account:
Deposit Account Number: 50-1515
Deposit Account Name: Conley Rose, P.C.

The Commissioner is hereby authorized to: (check all that apply)
 Charge fee(s) indicated below
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing Fee	\$ 770.00
1002 340	2002 170	Design filing fee	\$
1003 530	2003 265	Plant filing fee	\$
1004 770	2004 385	Reissue filing fee	\$
1005 160	2005 80	Provisional filing fee	\$
SUBTOTAL (1)			\$ 770.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Fee from Extra Claims below Fee Paid			
Total Claims - 20**	=	x 18.00	= \$.00
Independent Claims 3**	=	x 86.00	= \$.00
Multiple Dependent		280.00	= \$ 00.00
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	
1202 18	2202 9	Claims in excess of 20	
1201 86	2201 43	Independent Claims in excess of 3	
1203 290	2203 145	Multiple dependent claim, if not paid	
1204 86	2204 43	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) \$ 0.00			

*** or number previously paid, if greater; For Reissues, see above***SUBMITTED BY**

Complete (if applicable)

Name (Print/Type)	Michael S. Bush	Registration No. (Attorney/Agent)	31,745	Telephone	(972) 731-2288
Signature				Date	February 5, 2004

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